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CONFIRMATION NO. 5376

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|------------------------------------|---|---------------------|-------------------------------|--|
| SERIAL NUMBER 09/972,564 | FILING OR 371(c) DATE 10/04/2001 RULE | CLASS 705 | GROUP ART UNIT 3624 | ATTORNEY DOCKET NO. ALBA-001 |
|------------------------------------|---|---------------------|-------------------------------|--|

APPLICANTS
 Thomas Herzfeld, San Francisco, CA;

**** CONTINUING DATA *******
 This appln claims benefit of 60/238,244 10/05/2000 checked *NRS*

**** FOREIGN APPLICATIONS *******
none NRS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 10/31/2001

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|--|--|-------------------------------|----------------------------|--------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>NRS</i> | 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>NRS</i> <input type="checkbox"/> Met after Allowance <i>NRS</i> | STATE OR COUNTRY CA | SHEETS DRAWING 2 | TOTAL CLAIMS 6 | INDEPENDENT CLAIMS 2 |
|--|--|-------------------------------|----------------------------|--------------------------|--------------------------------|

Verified and Acknowledged *[Signature]* Examiner's Signature Initials *NRS*

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TITLE
 Renewable repriced mortgage guaranty insurance

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|-----------------------------------|---|---|
| FILING FEE RECEIVED 435 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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